

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW

JGD 06/08/01

JSC 4/29

INDEX OF CLAIMS			
Claim	Date	Claim	Date
Final	Original	Final	Original
1	3/2/01	51	101
2		52	102
3		53	103
4		54	104
5		55	105
6		56	106
7		57	107
8		58	108
9		59	109
10		60	110
11		61	111
12		62	112
13		63	113
14		64	114
15		65	115
16		66	116
17		67	117
18		68	118
19		69	119
20		70	120
21		71	121
22		72	122
23		73	123
24		74	124
25		75	125
26		76	126
27		77	127
28		78	128
29		79	129
30		80	130
31		81	131
32		82	132
33		83	133
34		84	134
35		85	135
36		86	136
37		87	137
38		88	138
39		89	139
40		90	140
41		91	141
42		92	142
43		93	143
44		94	144
45		95	145
46		96	146
47		97	147
48		98	148
49		99	149
50		100	150

If more than 150 claims or 10 actions
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